

Important Information

Background:

Infection with seasonal influenza causes high morbidity and mortality **among** older adults. Persons aged 65 years and older account for 90% of the 36,000 deaths that occur from complications of influenza each year. Therefore, it is important that all health care workers get vaccinated in order to protect themselves, their families and their patients from influenza.

Since 2009 Maryland nursing homes have submitted data on the influenza vaccination status of nursing home health care workers (HCW). The data collected is used to support the Medicaid Pay-For-Performance Program as well as to calculate vaccination rates for public report on the Maryland Consumer Guide to Long Term Care Services.

Following are important points you need to know about the influenza reporting initiative:

Important Points:

- 1) The MHCC requires Maryland nursing homes to report data on the number of paid, full-time and part-time employees and medical staff (defined as physicians, nurse practitioners, or physician assistants PAID by the nursing home) who received *any licensed, age appropriate influenza vaccination* ¹ either at the nursing home (on-site) or off-site.
- 2) The reporting period is October 1, 2020 March 31, 2021. All HCW of the nursing home who worked at least one day during that time period are included in the data to be reported. Health care workers are defined as paid full-time and part-time nursing home employees whether or not they have direct patient contact. This also includes "PRN" employees, if paid by the nursing home, and medical staff paid by the nursing home. Paid medical staff includes full and part-time physicians, physician assistants, and nurse practitioners who receive compensation from the nursing home. Any health care worker who falls under this description must be included in the data reported.
- 3) The flu vaccine obtained by the HCW must be vaccine released for the 2020-2021 influenza season.
- 4) In response to questions from some providers, we provide the following clarification of declination for medical reasons. In order to qualify as a medical reason for not receiving flu vaccine, the individual must have a documented medical contraindication **diagnosed by a physician or requiring medical treatment** such as a severe allergic reaction, severe egg allergy, severe reaction to any vaccine component, severe reaction after a previous dose of influenza vaccine, or a history of Guillian-Barre Syndrome.

¹¹ For the 2020-2021 U.S. influenza season, CDC and its vaccines advisory committee (ACIP) recommend that providers use any licensed, age-appropriate influenza vaccine (Inactivated influenza vaccines (IIV), Recombinant influenza vaccine (RIV), or live attenuated influenza vaccine (LAIV4) with no preference expressed for one vaccine over another. Source: https://www.cdc.gov/flu/about/season/flu-season-2020-2021.htm



- 5) The online survey will go live on April 1, 2021. Data for the reporting period, October 1, 2020 March 31, 2021, must be submitted to MHCC via the online survey by April 23, 2021. The link and password to the online survey will be e-mailed to all nursing home facilities by April 1, 2021.
- 6) Nursing home beds located in an acute hospital [often called transitional care units (TCU) or sub-acute care] are required to complete the 2020-2021 Maryland Nursing Home Health Care Worker (HCW) Influenza Vaccination and Infection Control Survey. There are two options for reporting by the TCU:

First option: all hospital HCW vaccination rates are reported through the Centers for Disease Control (CDC) National Healthcare Safety Network (NHSN). A TCU may submit the data for all hospital staff prepared and submitted to NHSN for Section B of the Maryland Health Care Commission survey.

Second option: report only the staff assigned to the sub acute or TCU unit in Section B.

Either option for inclusion of staff is acceptable; however TCU must also complete Sections A and C of the survey.

7) The data collected in the 2020-2021 survey will be used in two ways.

First, the Medicaid Office of Long Term Care and Community Support Services will use the data on staff immunization rates to calculate nursing home scores for the Pay-for-Performance methodology. If you have questions about the Pay-for-Performance program, please contact Jane Sacco by email at jane.sacco@maryland.gov.

Secondly, statewide and facility-specific staff immunization rates will be publicly reported in the Maryland Consumer Guide to Long Term Care Services. Each nursing home is able to print its final rates after completing the survey; statewide rates will be provided in July 2021 by the MHCC for comparison prior to the public release of the survey results.

- 8) The MHCC has the authority (COMAR10.24.03.02) to impose penalties of up to \$100 per day for long term care providers that fail to submit accurate, timely and complete data required by the Commission. Please be aware that your facility influenza vaccination data for the 2020-2021 reporting period needs to be received by the MHCC by the due date of April 23, 2021 or penalties will be imposed.
- 9) MHCC strongly recommends that nursing homes retain documentation from health care workers who state they received vaccination off-site.

Sample Survey Questions for the 2020-2021 Survey are on the following pages



Important Information

Infection with seasonal influenza causes considerable morbidity and mortality among older adults. Therefore, it is important that all health care workers (HCW) who work in long term care settings get vaccinated in order to protect themselves, their families and their patients from influenza. All Maryland nursing homes are required to report influenza vaccination status of all full-time and part-time employees and medical staff that are paid by the nursing home who worked at least one day in the nursing home between **October 1**, **2020 and March 31**, **2021**. **The completed online survey must be submitted to the MHCC by April 23**, **2021**.

If you have questions regarding these reporting requirements or you are unable to access the survey, please contact Julie Deppe at <u>Julie.deppe@maryland.gov</u>; or 410-764-3563.

Sample Survey Questions

Important note: influenza vaccine received must be vaccine released for the 2020-2021 influenza season².

Part A: Nursing Home Identification and Contact Information

- 1. Nursing Home Name
- 2. Nursing Home ID
- 3. Medicaid provider number (9 digits)
- 4. Name of Person Completing Survey
- 5. Title of Person Completing Survey
- 6. Telephone Number
- 7. Email address

Part B: Flu Vaccination Questions

- 1. Total number of paid full-time and part-time employees and medical staff paid by the nursing home working between October 1, 2020 and March 31, 2021.

 (Enter the total number of employees; the number entered must equal the sum of items 2-5.)
- 2. Of the total number of paid staff listed in question 1, provide the number who received influenza vaccine (written documentation of off-site vaccination required).
- 3. Of the total number of paid staff listed in question 1, provide the number who did NOT receive influenza vaccine due to **medical contraindications diagnosed by a physician or**

² For the 2020-2021 U.S. influenza season, CDC and its vaccines advisory committee (ACIP) recommend that providers use any licensed, age-appropriate influenza vaccine (Inactivated influenza vaccines (IIV), Recombinant influenza vaccine (RIV), or live attenuated influenza vaccine (LAIV4) with no preference expressed for one vaccine over another. Source: http://www.cdc.gov/flu/about/qa/nasalspray.htm



cor		re reaction after a p	ling a severe egg allergy, severe allergy to any vaccine revious dose of influenza vaccine, or a history of Guillain-		
4.			sted in question 1, provide the number who did NOT religious objections.		
5. rec		al number of paid st vaccine due to othe or	aff listed in question 1, provide the number who did NOT er objections		
	no docum	entation of vaccinat	ion was provided		
		++++++++++++++++++++++++++++++++++++++	++++++++++++++++++++++++++++++++++++++		
6.	•	oes your nursing home have a primary infection control coordinator/program manager who nanages the day-to-day details of the facility infection prevention and control program?			
An	swer choices	Yes	No		
7.	training cours and Disease	e that is approved b	tion 1 attended a basic infection prevention and control by the Office of Health Care Quality and the Epidemiology the Department? (The Maryland Infection Control Institute oproved courses.)		
An	swer choices	Yes	No		
8.	How many hours per week does this person spend on infection prevention and control program activities?				
9.	policy that red Please check	quires health care w the one box that be	a mandatory influenza vaccination policy is defined as a orker influenza vaccination as a condition of employment. est describes your facility's current status relative to of nursing home employees:		
	-	/ nursing home has licy.	implemented a mandatory employee influenza vaccination		
			s not have a mandatory employee influenza vaccination plement one for the 2020-2021 flu season.		
	•	nursing home has luenza vaccination	no immediate plans to implement a mandatory employee policy.		
10.			atory influenza vaccination policy, how many staff were or stopped working as a result of refusing the flu vaccine?		



tegies does your nursing home employ to raise awareness and provide access to vaccination for employees and others working in the facility? (Check all that apply)
 Provide vaccinations onsite
 Provide influenza vaccination free of charge to employees
 Provide influenza vaccination free of charge or at reduced cost to non-employees (such as physician staff not paid by the nursing home, volunteers, or students).
 Distribution of educational material (including fliers, posters, leaflets, etc.) for influenza vaccination education
 Educational presentations to staff on the importance of influenza vaccination
hods does your facility use to document influenza vaccination and declinations yees? (Check all that apply)
 Employees required to provide written proof of offsite vaccination
 Employees required to provide physician documentation to support medical contraindications
 Employees sign a form when declining for medical contraindications
 Employees sign a form when declining for religious reasons
 Employees sign a form when declining for other reasons
 Documentation (if any items are checked) is kept with other employee records
 No documentation is required
tegies are used to ensure compliance with your flu policy or in the absence of a plicy to limit the spread of influenza in your facility? (Check all that apply) Termination of employment (if employee declines for reasons other than medical
contraindication)
 Employee required to wear a face mask if not vaccinated
 Employee restricted to certain areas of the nursing home during flu season
 Impose disciplinary action for employee violations of not wearing face mask or not observing restriction to certain areas of the facility
 Non-employee (i.e. medical staff not paid by the facility or contracted staff) are required to wear a face mask
 Non-employee suspension of privileges
 None of the above is used
Other (please specify)



COMMENTS: